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	ADDRESS (Note: Legibly mark-up w		Note: A certificate of	Note: A certificate of mailing can only be used for domestic mailings			
20985 7590 10/17/2007			1	accompanying papers formal drawing, must transmission.			
P.O. Box 1022 Minneapolis, MN 55				United States Postal S in an envelope addres	Certificate of Mailing or Transmission I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.		
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APPLICATION NO.	APPLICATION NO. FILING DATE FIR		FIRST NAMED	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/612,997	07/02/2003	Richard D. Mu		Muratori	10559-077002	1866	
TITLE OF INVENTION: GRAPHICAL USER INTERFACE							
APPLN. TYPE	SMALL ENTITY	ISSUE	a FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$14	i40	\$300	\$1740	01/17/2008	
EXAMINER ART		ART	UNIT	CLASS-SUBCLASS			
BAUTISTA, XIOMARA L. 21			79	715-772000			
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). C			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1. Fish & Richardson P.C. 2				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE (CITY and STATE OR COUNTRY)							
Intel Corporation Santa Clara, CA							
Please check the appropriate	assignee category or categories	s (will not be pr	inted on the pate	ent): [] individual [X] c	corporation or other private group	pentity [] government	
4a. The following fee(s) are 6 [X] Issue Fee [X] Publication Fee (No si [] Advance Order - # of	small entity discount permitted)	-	 4b. Payment of Fee(s): [X] The requisite fees are being paid electronically with this submission. [] Payment by credit card. Form PTO-2038 is attached. [X] The Director is hereby authorized to charge any deficiency in fee(s), or credit any overpayment, to Deposit Account Number <u>06-1050</u>. 				
5. Change in Entity Status (from status indicated above) [].a. Applicant claims SMALL ENTITY status. See 37 CFR 1.2.7. []b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.2.7.(g)(2).							
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(Authorized Signature)			(Date)	January 14, 2008			
Typed or Printed Name	Typed or Printed Name Paul A. Pvsher			Registration No.			
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